2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000035818

City-St-Zip:

NORTHMIAMI, FL 33181

Entity Name: A1 WOMAN'S HEALTH CARE, INC.

FILED Mar 10, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1250 SW 1ST MIAMI, FL 33135 **Current Mailing Address: New Mailing Address:** 1250 SW 1ST MIAMI, FL 33135 FEI Number: 65-0829301 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FOWLER, ANN L 13105 IXÓRA CT. #116 NORTH MIAMI, FL 33181 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSD () Delete Title: () Change () Addition FOWLER, ANN L Name: Name: 13105 IXORA CT, #116 Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANN L. FOWLER PRES 03/10/2008